

FSA-2254A
(Proposal 7)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

GUARANTEED LOAN REPORT OF LOSS – REPORT TYPES 1, 2, 5, 6, and 7
(Supplemental Form to FSA-2254)

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PART A – IDENTIFYING INFORMATION (Complete for Report Types 1, 2, 5, 6, and 7)

| | |
|---|--|
| 1. Borrower's Name | 2. FSA ID Number |
| 3. Agency Loan Number | 4. Original Loan Amount \$ |
| 5. Original Date of Loan | 6. Percent of Guaranteed Portion held by Lender % |
| 7. Loan Type (Check applicable box): <input type="checkbox"/> FO-Farm Ownership <input type="checkbox"/> OL-LOC-Operating Loan – Line of Credit <input type="checkbox"/> OL-Operating Loan <input type="checkbox"/> SW-Soil and Water <input type="checkbox"/> EE-Economic Emergency | |
| 8. Report Type Code (Check applicable box): <input type="checkbox"/> 01 – Estimated Loss (Liquidation) <input type="checkbox"/> 06 – Debt Restructure Loss (Write without Shared Appreciation) <input type="checkbox"/> 02 – Final Loss (Liquidation) <input type="checkbox"/> 07 – Debt Restructure Loss (Write Down-with Shared Appreciation) <input type="checkbox"/> 05 – Loss – Bankruptcy Reorganization | |

PART B – LOAN INFORMATION

1. Current Interest Rate Information (Complete for Report Types 1, 2, 5, 6, and 7)

| | | | | |
|-----------------------------|--|--|---------------------------------|--|
| A. Guaranteed Rate % | B. Guaranteed Rate Type (Check one): <input type="checkbox"/> Variable <input type="checkbox"/> Fixed | C. Interest Rate Basis (Check one): <input type="checkbox"/> 360 Days <input type="checkbox"/> 365 Days | D. Non-Guaranteed Rate % | E. Non-Guaranteed Rate Type (Check one): <input type="checkbox"/> Variable <input type="checkbox"/> Fixed |
|-----------------------------|--|--|---------------------------------|--|

2. Lender Liquidation Information (Complete for Report Types 1 and 2). NOTE: For Item 2C, if requesting an extension of the interest Accrual Termination 210-day rule, explain the special circumstances in Item 60 on the FSA-2254.

| | | |
|---|-----------------------------------|--------------------------------------|
| A. Payment Due Date (For Guaranteed Loan) | B. Liquidation Plan Approval Date | C. Interest Accrual Termination Date |
|---|-----------------------------------|--------------------------------------|

3. Bankruptcy Case Information (Complete for Report Type 5)

| | | |
|---------------------------|--|---------------------------|
| A. Filing Date | B. Chapter Number (Check one): <input type="checkbox"/> 7 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 | C. Plan Confirmation Date |
| D. Bankruptcy Case Number | E. Effective Date | |

4. Debt Restructure (Court-Ordered or Negotiated by Lender) (Complete for Report Types 5, 6, and 7)

| | |
|--------------------------|---------------------------|
| A. New Loan Amount \$ | B. Accrued Interest \$ |
|--------------------------|---------------------------|

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PART C – GUARANTEED LOAN ITEMS

| | |
|---|--|
| 1. As of date: (Principal balance) <i>(Complete for Report Types 1, 2, 5, 6, and 7)</i> | |
| 2. As of date: (Accrued Interest owed) <i>(Complete for Report Types 1, 2, 5, 6, and 7)</i> | |

PART D – PROTECTIVE ADVANCES AND LEGAL EXPENSES

Principal Balance on Protective Advances *(Complete for Report Types 2 and 5)*

| | |
|--|----|
| 1. Real Estate Taxes | \$ |
| 2. Transportation | \$ |
| 3. Other (Explain in Item 60 on FSA-2254) | \$ |
| 4. Total Principal Balance on Protective Advances (Sum of Real Estate Taxes + Transportation + Other) (Item 23 on FSA-2254) | \$ |

PART E – COLLATERAL

Collateral/Proceeds *(Complete for Report Types 1, 2, and 7)*

1. Real Estate Property

| | |
|--------------------------------|----|
| (a) Real Estate Property Value | \$ |
| (b) Appraisal Date | |
| (c) Number of Acres | |

2. Chattel Property

| | |
|--|----|
| (a) Crops Appraisal Date: _____ | \$ |
| (b) Livestock Appraisal Date: _____ | \$ |
| (c) Equipment Appraisal Date: _____ | \$ |
| 3. Total Collateral/Proceeds (Sum of Real Estate Value + Crops + Livestock + Equipment) (Item 27 on FSA-2254) | \$ |

PART F – LIQUIDATION EXPENSES/PRIOR LIEN (Continued on Page 3)

1. Liquidation Cost - *(Complete for Report Types 1 and 2)*

| | |
|---|----|
| (a) Appraisals | \$ |
| (b) Auctioneer Expenses | \$ |
| (c) Repairs | \$ |
| (d) Legal Expenses | \$ |
| (e) Environmental Cost | \$ |
| (f) Marketing Expenses | \$ |
| (g) Other (Explain in Item 60 on FSA-2254) | \$ |
| 2. Total Liquidation Costs - (Item 30 on FSA-2254) | \$ |

PART F - LIQUIDATION EXPENSES/PRIOR LIEN

2. Prior Liens *(Complete for Report Types 1 and 2)*

| | |
|---|----|
| A. Real Estate Debts | |
| (1) Name of Lien Holder: | \$ |
| (2) Name of Lien Holder: | \$ |
| (3) Name of Lien Holder: | \$ |
| (4) Name of Lien Holder: | \$ |
| (5) Total Real Estate Debts | \$ |
| B. Chattel Property Debts | |
| (1) Crops | |
| (a) Name of Lien Holder: | \$ |
| (b) Name of Lien Holder: | \$ |
| (c) Name of Lien Holder: | \$ |
| (d) Name of Lien Holder: | \$ |
| (e) Total Crops Debts | \$ |
| (2) Livestock | |
| (a) Name of Lien Holder: | \$ |
| (b) Name of Lien Holder: | \$ |
| (c) Name of Lien Holder: | \$ |
| (d) Name of Lien Holder: | \$ |
| (e) Total Livestock Debts | \$ |
| (3) Equipment | |
| (a) Name of Lien Holder: | \$ |
| (b) Name of Lien Holder: | \$ |
| (c) Name of Lien Holder: | \$ |
| (d) Name of Lien Holder: | \$ |
| (e) Total Equipment Debts | \$ |
| (4) Total Chattel Property Debts <i>(Sum of Total Crop Debt + Total Livestock Debt+ Total Equipment Debt)</i> | \$ |
| (a) Total Prior Liens (Sum of Total Real Estate Debt + Total Chattel Debts) (Item 31 on FSA-2254) | \$ |

3. Unpaid Taxes, Ground Rents, and Assessments *(Complete for Report Types 1 and 2)*

| | |
|---|----|
| A. Unpaid Taxes | \$ |
| B. Ground Rents | \$ |
| C. Assessments | \$ |
| D. Other <i>(Explain in item 60 on FSA-2254)</i> | \$ |
| E. Total Unpaid Taxes, Ground Rents, and Assessments (Item 32 on FSA-2254) | \$ |

PART G - ADJUSTMENTS

1. Other Deductions *(Complete for Report Types 1, 2, 5, 6, and 7)*

| | |
|---|----|
| A. Negligent Servicing | \$ |
| B. Unaccounted Collateral Amount | \$ |
| C. Other (Explain in Item 60 on FSA-2254) | \$ |

| | |
|---|----|
| 4. Total Other Deductions (Item 38 on FSA-2254) | \$ |
|---|----|